

POSITION	ID NO.	DATE
CLASSIFIER	699	3/25/95
EXAMINER		2/25
TYPIST	336	4/16
VERIFIER	315	4/16/95
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

2nd Available Copy

INDEX OF CLAIMS

Claim	Date
1	2/15/95
2	2/20/95
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through numbers) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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